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FACSIMILE TRANSMISSION COVER SHEET

Date: November 9, 2005

To: United States Patent and Trademark Office
Examiner: Vo, Tung T.; Art Unit: 2613

Fax: (571) 273-8300

Re: **Application Serial No.: 09/910,684**
Filing Date: 7/20/2001; First-Named Inventor: Hwang
Attorney Docket No.: 0190151

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 16

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated August 22, 2005.

Thank you.

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Attorney Docket No.: 0190151

AMENDMENT COVER SHEETIN RE APPLICATION OF: Hwang, et al.SERIAL NO.: 09/910,684 FILED: 7/20/2001FOR: Memory Control Apparatus and Efficient Search Pattern for Block-Matching Motion EstimationHONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.☐ The fee has been calculated as shown below:☐ EXTENSION FEE

| | RATE Non-Small Entity | RATE Small-Entity | FEE |
|------------------------------------|--------------------------|----------------------|-----|
| FIRST MONTH AFTER TIME PERIOD SET | 120.00 | 60.00 | \$ |
| SECOND MONTH AFTER TIME PERIOD SET | 450.00 | 225.00 | \$ |
| THIRD MONTH AFTER TIME PERIOD SET | 1,020.00 | 510.00 | \$ |
| FOURTH MONTH AFTER TIME PERIOD SET | 1,590.00 | 795.00 | \$ |

☐ TOTAL EXTENSION FEE \$ 0.00☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

| | Column 1 Number of Claims after Amendment | Column 2 Number Previously Paid for | Column 3 Number of Extra Claims | RATE Non-Small Entity | RATE Small Entity | FEE |
|--|--|--|--|-----------------------------|----------------------|-----|
| TOTAL CLAIMS | 19 | MINUS **20 | * = 0 | x 50 | x 25 | \$ |
| INDEPENDENT | 3 | MINUS ***3 | * = 0 | x 200 | x 100 | \$ |
| First presentation of multiple dependent claim | | | | + 360 | + 180 | \$ |

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

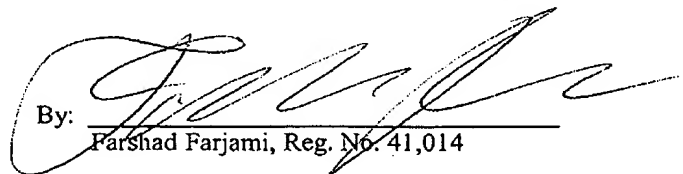
Attorney Docket No.: 0190151

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- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

Date:

11/9/05

By:

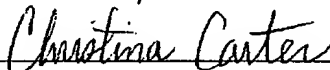

Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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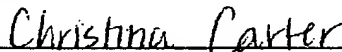
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Signature



Name of Person Performing Facsimile Transmission



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☐ TOTAL EXTENSION FEE \$ 0.00☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

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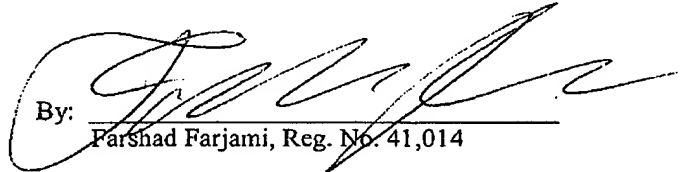
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Farshad Farjami, Reg. No. 41,014

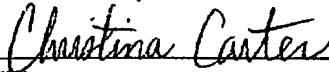
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Application Serial No.: 09/910,684
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In re Application of: Hwang, et al.

Art Unit: 2613

Serial No.: 09/910,684

Examiner: Vo, Tung T.

Filed: July 20, 2001

For: **MEMORY CONTROL APPARATUS
AND EFFICIENT SEARCH PATTERN
FOR BLOCK-MATCHING MOTION
ESTIMATION**

AMENDMENT AND RESPONSE TO NON-FINAL ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is submitted in response to the *Non-Final* Office Action, dated August 22, 2005, in the above-referenced patent application. Please enter and consider the following amendments and remarks.